

| SENDER WILL CHECK CI   |                  | IFICATION TOP AND BOTTOM |                |           |
|--|------------------|--------------------------|----------------|-----------|
|  | UNCLASSIFIED     | CONFIDENTIAL             | SECRET         |           |
| <b>OFFICIAL ROUTING SLIP</b>   |                  |                          |                |           |
| TO   | NAME AND ADDRESS |                          | DATE           | INITIALS  |
| 1  | <i>J/S</i>       |                          | 14 MAY<br>1969 | <i>HJ</i> |
| 2  | <i>Office.</i>   |                          |                |           |
| 3  |                  |                          |                |           |
| 4  |                  |                          |                |           |
| 5  |                  |                          |                |           |
| 6  |                  |                          |                |           |
| ACTION   |                  | DIRECT REPLY             | PREPARE REPLY  |           |
| APPROVAL   |                  | DISPATCH                 | RECOMMENDATION |           |
| COMMENT  |                  | FILE                     | RETURN         |           |
| CONCURRENCE  |                  | INFORMATION              | SIGNATURE      |           |
| <b>Remarks:</b><br><i>Cust<br/>Will you<br/>hand be<br/>continued<br/>pls /<br/>og</i> |                  |                          |                |           |
| FOLD HERE TO RETURN TO SENDER  |                  |                          |                |           |
| FROM: NAME, ADDRESS AND PHONE NO.  |                  |                          | DATE           |           |
| Executive Officer <i>pmt</i>   |                  |                          | 13 MAY 1969    |           |
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GPO : 1968 O - 297-542

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